

The emerging issue of crystal methamphetamine essay



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INTRODUCTION Crystal methamphetamine use among people in some First Nations communities (both in Canada and the United States) has evolved into an issue that is requiring more and more attention. Indicative of this, in July of 2005, the Assembly of First Nations (AFN) in Canada passed a resolution specifically directed at this emerging issue. As a result of this resolution, the AFN has identified the need for the development of a First Nations National Task Force on Crystal Meth to develop a Strategic Action Plan to Address the Emerging issue of Crystal Meth in First Nations Communities.

Generally speaking, this paper provides basic information about crystal methamphetamine as well as information that is First Nations specific. The first part of the paper discusses: what crystal meth is; who is using it; how it is used; how it is made and; how it affects the body, mind, relationships and the environment. In Part II, interactions between governments (e.g. : health/drug strategies), large pharmaceutical companies and organized crime are examined (e.g. : production levels of amphetamines). The role that these entities play in activities surrounding the production and sale of crystal methamphetamine—with emphasis on issues related to First Nations—is articulated. First Nations crystal meth treatment strategies are also examined. Part III, aspires to put a 'human face' on the rising problem of crystal methamphetamine addiction in First Nations communities. Tala Tootoosis' (Plains Cree/Nakota) story is briefly stated and the crystal meth addiction situation across the border on the Navajo Nation is commented upon. These examples aim to illustrate how crystal meth addiction has

negatively affected a First Nations individual and the devastating impact the drug has had on one Native American community.

It is important to recognize from the outset of this paper that crystal methamphetamine is not a First Nations specific problem and should not be perceived as one. Some communities have a problem with it, while others do not. This does not, however, mean that communities and leadership should not be proactive and on the forefront of this emerging issue. This important observation was provided at a workshop by the Prevention Awareness and Community Education (P. A. C. E) team —based out of the Saskatchewan Indian Institute of Technology (SIIT). P. A. C. E was founded on the principles that education and awareness are key measures in protecting First Nations communities against the dangers of using crystal methamphetamine.

Another important idea to consider from the outset is that while the emergence and use of crystal meth is a relatively new phenomenon (i. e. : compared to other mind altering agents), the issue of addiction is nothing new. While it is important to focus on the 1 In this paper, crystal methamphetamine is referred to as: “ crystal methamphetamine”, “ crystal meth” or “ meth”. 2 Please see Appendix A for the full content of this resolution. 3 This includes input from First Nations leadership. 2 specifics of how to most effectively deal with meth production and use, it is also just as important not to overly focus on it. For instance, Michael Siever of the Stonewall project in San Francisco notes that even with the introduction of crystal methamphetamine into the addiction picture, the crack cocaine problem is still as prevalent as ever (Huff, 2005). Thus, just because crystal methamphetamine is now part of the ‘ addictions picture’ does not mean

addictive behaviours with regard to other substances will magically go away. Thus, effective holistic substance abuse strategies should be taken into consideration.

One such example is the work undertaken by the First Nations and Inuit Mental Wellness Advisory Committee of the First Nations and Inuit Health Branch - Health Canada. This committee has developed a Strategic Action Plan for First Nations and Inuit Mental Wellness (includes Mental Health and Addictions). PART I CRYSTAL METHAMPHETAMINE: WHAT IS IT? Historical Development of Amphetamines and Their Use To understand what crystal methamphetamine is it is necessary to know a bit about the origins of amphetamines and methamphetamines in industrialized societies. Amphetamine was first synthesized in Germany in 1887.

Its more powerful cousin, methamphetamine, was then synthesized in Japan in 1919. Into the mid 1900's methamphetamine was used by troops on both sides of battle (in WWII, Korean Wars, Vietnam War) and could often be found in soldiers field kits. 4 After WWII, California biker gangs produced methamphetamine or 'speed' in the 60's and 70's —smuggling it in the "crank" case of motorcycles (one of the many slang terms for methamphetamine is "crank") (Huff, 2005). Today, crystal meth has become the most widespread and popular form of the drug, largely because it is so easy to make that anyone can set up a lab (instructions are widespread on the World Wide Web), but also because motorcycle gangs, which are becoming dominant in organized drug trafficking, usually sell the drug (CBC, 2004). Like penicillin (another wartime drug) 5 , amphetamines and

methamphetamines have been found to have limited medical use. Medical
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professionals have used methamphetamines in small doses with some success to treat Attention Deficit Disorder ADD. (Farley 1997).

Methamphetamine was also marketed to women primarily as an appetite suppressant for the purpose of losing weight (a side effect of the drug) (2005). It was and continues to be used non-medically and is commonly known as 'speed'. In 2004 troops started using Provigil, also called "go pill". Use of drugs in military situations is actually something important to recognize. Like today, as is the case with methamphetamines, future drugs used in military contexts may also cause problems as they find their ways into the streets of civilian communities. Before the invention of penicillin, soldiers might often die of gangrene if wounded by bullet because there was nothing available (as strong as penicillin) to combat the infection. In contemporary society ephedrine or pseudoephedrine, the key ingredient that is extracted in the crystal methamphetamine 'cooking' process, is an ingredient in over-the-counter sinus/cold medication. It provides sinus relief and also, for some, gives a boost of energy (PBS, n.d.). Crystal Meth: The 'Super-speed' in today's society is often a highly addictive feeling of temporary euphoria and energy enhancement. This is 'ladies speed', 'crank' or 'mye'. (Mental Health and Addictions Division et al, 2005) (as crystal-like appearance rather than through what it may be referred to at the street level. Crystal Methamphetamine Hydrochloride—or crystal methamphetamine—that is sold illegally on the streets in contemporary communities is a super-concentrated form of methamphetamine. It is derived through a cooking process that cannot be completed without the inclusion of ephedrine or pseudoephedrine. Other ingredients that can be used in the cooking process to pull the ephedrine or

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pseudoephedrine out include toxic substances such as: engine starter, lithium battery strips, anhydrous ammonia (Mental Health and Addictions Division et al, 2005). Ingestion (swallowing), snorting, smoking or injecting crystal meth are ways to take the substance. It produces a

Methamphetamine hydrochloride is called crystal methamphetamine because it often comes in the form of clear chunky crystals resembling ice. Glass, crystal, tina, 'g' and ice are sometimes used on the street to refer to this particular form of methamphetamine (Huff, 2005). On occasion, one may find crystal meth that has a yellowish color can often mean that the product is associated with Asian manufacturers. Slang terminologies for this version of crystal meth are 'amber' or 'shabu'. P. A. C. E. representatives note that in Saskatchewan crystal methamphetamine is often called 'jib' or 'gak'. In Saskatchewan's rural areas, P.

A. C. E. indicates that it can often be referred to as The many ways of referring to meth can be confusing, especially since some of the terms used—like 'crank' or 'speed', are the same for other derivatives of methamphetamine mentioned in the Historical Development of Amphetamines and Their Use section above). Thus, one of the better ways to identify crystal meth would seem to be by its color. Crystal meth is relatively cheap for a dealer to make and for a user to buy. According to P. A. C. E. representatives, all materials can be purchased to make significant batches of crystal meth for less than one-hundred dollars (Mental Health and Addictions Division et al, 2005). The street value of meth ranges from 80-120 dollars per gram and 15-20 dollars a point (Saskatchewan Institute of Technologies, 2004a). The fact that crystal methamphetamine can be both made and bought at a relatively

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cheap price make 6 The most common street name for methamphetamine is simply “meth” or “crystal meth. The slang used for methamphetamine in your area may include some of the following terms or include entirely new ones: Meth, crank, crystal, crystal meth, ice, speed, C. R. , go, go fast, geek, gack, geet, glass, red rock, tweak, mp, prope dope, P2P, poor man’s coke, pink glass, chalk, zip. (In the Know Zone, n. d.). 4 it economically desirable to both produce and consume. The high, which is sometimes compared to cocaine, is said to be much longer and more intense. This furthers the danger of addiction as a user gets “more bang for their buck”. Crystal meth’s cheap price along with: the fact that it can be taken into the body in many different ways (which may increase the number of users given the several methods of administering it to one’s self and; the fact that it can be made using over-the-counter items, means that it is a rather attractive choice—insofar as illegal drugs are concerned. First Nations youth, who not have a lot of money and are also more likely to live in urban or rural areas, may be amongst the more vulnerable user populations. HOW DOES CRYSTAL METHAFFECT FIRST NATIONS? 87 in the users of crystal meth, methamphetamine use is not a particularly new phenomenon. ‘quick fix’, fast society exemplified in the United States, and indeed North America. (Wan, 2004a), it does not differentiate between First Nations and non-First Nations. Indeed the American states has in the past few years began to creep north of the border. As already indicated, amphetamine and/or methamphetamine use in the industrialized world occurred sometime around when it was first synthesized — amphetamines 18 Germany and methamphetamines 1919 in Japan. Thus, although we are primarily concerned here about Currently, with respect to the use of crystal methamphetamine, P. A. C. E representation indicates that there is no single <https://assignbuster.com/the-emerging-issue-of-crystal-methamphetamine-essay/>

profile (e. g. : socioeconomic status, ethnicity) (Mental Health and Addictions Division et al, 2005). The profile of a user seems difficult to pin down (at least until the point where they encounter law enforcement agents as a result of illegal activities somehow related to meth).

Patricia Case (Huff, 2005) , a social medicine professor from Harvard and a specialist on American stimulant use, notes that the drug fits well with the N. Basically, there appears to be some statistics gathered profiling subpopulations who use crystal methamphetamine, but more work needs to be done in this area, particularly amongst First Nations peoples in Canada. 7 For example while Yorkton Saskatchewan an area with a high concentration of First Nations, reports a 33% user rate of crystal methamphetamine (Saskatchewan Indian Institute of Technology The statistics and profiles found in the research for this paper were mostly American. If they were Canadian, like the Yorkton case, they did not specify First Nations ancestry. Nonetheless, the statistical data that was found is presented here because there is at least some congruency between meth usage and meth addiction behaviours in Canada and United States. Indeed, the crystal meth problem that became an epidemic in so A A 7 This type of statistical information on crystal methamphetamine use amongst First Nations peoples in Canada might be considered as a section in the next round of the First Nations Regional Health Survey. 5 Crystal Meth users (Saskatchewan Indian Institute of Technologies, 2004a) often range from 14-33 and typical ones are 15-22. These statistics have been gathered from users in Saskatchewan that have come into contact with law enforcement. Thus, there may still that use crystal methamphetamine. Nations communities are encountering problems

with crystal amphetamines through various at of First Nations peoples than many other provinces; secondly, there is generally greater usage of crystal meth in western Canada than in high school or college. However, it is noted that other communities, particularly Native American ones, like who want to lose weight and; gay males into the dance scene, bath houses and what are known as circuit parties, these are hidden subpopulations of varying ages Ethnicity, Subpopulations and Gender Although 'official' data is sparse with regard to First Nations and crystal methamphetamine use, it can nonetheless be deduced that some First Nations strategies that are being implemented by governments and leadership. For instance, we have already noted that the Assembly of First Nations passed a resolution to focus in on the emerging issue of crystal meth in communities. 8 In Saskatchewan, for instance, the target populations for their crystal methamphetamine strategy are: youth, Aboriginal people, street individuals and northern residents (Saskatchewan Health, 2004). That Saskatchewan Health has developed a strategy that includes First Nations makes sense for at least two reasons: Firstly Saskatchewan as a prairie province has a higher concentration than there is in central or eastern Canada. In the United States some statistics have been gathered on crystal methamphetamine use broken down by ethnicity. Huff (2005) indicates crystal meth use is relatively low in African American community compared to Caucasian and Native American communities which are significantly higher and relatively the same. Other observations note that people who use most are Caucasian, blue collar (20-30), unemployed, in cities are reporting large increases in meth usage (The Anti-Meth Site, n. d.). In Canada, based on data collected from mental health workers, police and research scientists, profiles of meth use point to: young ravers from dance <https://assignbuster.com/the-emerging-issue-of-crystal-methamphetamine-essay/>

club crowds; large numbers of rural and small town poor in North America; people with parties (Mental Health and Addictions Division et al, 2005) 9. Some statistics also indicate that women are more likely to use meth than cocaine (Huff 2005).

This may be due to the increased energy that meth gives. It could also be 8
See introduction. 9 Generally speaking, in context of sexual activity, using crystal meth can heighten libido and impair judgment. Impaired judgments due to decreased levels of inhibitions can lead to risky sexual activity. As well, those users that use intravenously increase their chances of contracting HEP B or C or HIV/AIDS. Crystal methamphetamine is not necessarily an aphrodisiac, but through increasing the level of dopamine through triggering the release of powerful brain chemicals, it may increase sex drive. Ironically, while desire and stamina are increased, it ultimately decreases the users' sexual desirability and performance (PBS, n. d.). 6
connected with the fact that crystal meth can suppress one's appetite. Given the over emphasis, particularly of mainstream - media images, on the 'ideal woman' being one who is thin, some women who use and abuse crystal methamphetamine may be partially dealing with a negative body image. This is indicated by P. A. C. E that there is no single profile of a crystal meth user. The following data has been taken from police statistics on meth users in Saskatchewan • 25% of people who inject or ingest crystal meth wait about 1-3 hours to feel the effects and those who snort the drug feel effects in 3-5 minutes. There is no doubt however, that more research is still needed on how the addiction of a crystal meth user differs from other addictions that have developed over time. As you can see HOW CRYSTAL METH IS USED Crystal methamphetamine can be

ingested, snorted, injected or smoked. It thus appeals to multiple arrays of people in society because it can be taken in so many ways. Perhaps why it was introduced:

- 3% of people ingested
- 12% of people snorted
- 60% of people smoked

Constable Joanne Smallbones from the Integrated Unit in Saskatoon notes that smoking and injecting users are those who are most vulnerable to heavy addiction. This is most likely due to the experience of an almost immediate euphoric rush (Saskatchewan Indian Institute of Technologies, 2004a). People who do not 'rush' associated with snorting or ingesting. While not representative of the entire user population, a clear fact about how crystal methamphetamine is used can be formulated through viewing the police statistics from Saskatoon. The statistics illustrate that it is important to differentiate and notice the method by which a user is taking crystal methamphetamine. If someone is smoking or injecting it intravenously, they are much more likely to run in to some type of trouble with the law. It seems that addiction to smoking and injecting crystal meth can cause a person's behaviour to radically deviate. Deviant behaviour however is associated with a type of addiction and not just addiction to crystal methamphetamine. Since crystal meth is a relatively new phenomenon, it should be noted, it has not been a part of society for a longer period.

HOW CRYSTAL METH IS MADE

There are a few different ways that crystal methamphetamine can be manufactured. The labs are easy to set up in the home. Common areas include a bedroom or a bathroom. Crystal meth is easier to make compared to other drugs as the chemical process is rather easy. Instructions can be found on the internet and a book available for purchase by Uncle Fester, "Secrets of Methamphetamine Manufacturers", claim to 'make meth just like the real cooks'. Books like this are dangerous

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because they do not talk about the dangers to the individual (and others) from operating a meth lab. Ingredients can include elements such as: engine starter, lithium battery strips, anhydrous ammonia. Meth cannot be made without ephedrine or pseudoephedrine —found in many cough syrups. Making or 'cooking' meth is an extracting process where the other chemicals are used to pull the ephedrine or pseudoephedrine out (Mental Health and the following descriptions taken from the National Drug Intelligence Centre (2003) in a rough which crystal methamphetamine can be manufactured: simple chemicals are ephedrine or pseudoephedrine, hydroiodic acid and red phosphorus. This method can yield multi-pound quantities of high quality d-methamphetamine associated with Mexican organized crime and criminal groups. One or pseudoephedrine, iodine and red phosphorus. The required hydroiodic acid in this variation of the hydroiodic acid/red phosphorus method water with red phosphorus. This method yields high quality d-methamphetamine through the reaction of iodine in water with hypophosphorous acid. Known as the hypo method, this method yields lower quality d-methamphetamine. Sulfuric acid is more prone than red phosphorus to cause a fire and can produce deadly phosphine gas. and sodium or lithium metal. Also known as the Nazi method (because German government used it during World War II) this method typically yields ounce quantities of high quality d-methamphetamine and often is used by independent dealers and producers. (U.S. Customs and Border Protection, 2005).

All ingredients to make crystal meth can be purchased legally. In the United States are 'cooking' methods that include Hydroiodic acid/red phosphorus method The primary d-methamphetamine and often is as well as Iodine/red

phosphorus method The principal chemicals are ephedrine. It is produced by the reaction of iodine in the iodine/hypophosphorous acid method. The principal chemicals are ephedrine or pseudoephedrine, iodine and hypophosphorous acid. The required hydriodic in this variation of the hydriodic acid/red phosphorus method is produced by K Hypophosphorous and Birch method. The principal chemicals are ephedrine or pseudoephedrine, anhydrous ammonia and iodine.

10 Some pharmacies in Canada now have in their windows a "Meth Watch" sticker meaning that the store employees are aware that cough medicines can be used to make crystal meth. Thus, they are now mindful of suspicious purchases (e.g. : purchasing large amount of pseudoephedrine based cough syrup medication).

8 Phenyl-2-propanone method P 2P - The principal chemicals are phenyl -2-propanone, aluminum, methylamine and 's (outlaw motorcycle gangs). PS AND it is not talking about the amount used (because the hit is powerful) but the frequency of use. An individual chronically addicted to crystal meth suffers or permanent damage to themselves and negatively affect their relationship to the web of life. As dopamine which can result in symptoms like those of Parkinson's disease. With long term usage of Crystal meth, brain scans indicate that it stays within the body for a much longer time than cocaine and other drugs. In prisons, to give an idea, new inmates who are told that crystal meth releases into one's system. For First Nations who still may be experiencing some form of mercury poisoning. This method yields lower quality dl-methamphetamine and traditional has been associated with OMS.

HOW CRYSTAL METH AFFECTS THE BODY, MIND, RELATIONSHIP TO THE ENVIRONMENT

Forming a crystal meth habit can be detrimental to an individual's body, mind, relationships and the environment. For many, it is a highly addictive substance. With meth, it is dangerous because we so can cause severe damage to the body. Taking crystal meth increases the heart rate and rapidity of breathing. It releases high levels of the neuro-transmitter dopamine which stimulates the brain cells enhancing mood and body movement (Saskatchewan Indian Institute of Technologies, 2004a). Long term use can cause tooth decay, strokes, kidney failure and seizures (Huff, 2005). Well, over time, this drug can cause reduced levels of body damage can be permanent. Other complications include cardiovascular collapse, respiratory problems, irregular heart beat and death. Some studies compare the effects of meth and cocaine because they are both substances that are highly addictive. It is noted that usage of cocaine produced dopamine release levels of 400% whereas usage of crystal meth boosts dopamine levels up to 1500%. This fact alone shows how crystal meth can be dangerously addictive (Saskatchewan Indian Institute of Technologies, 2004a). Meth also so are meth users often are able to sell their urine for the crystal meth component in it. Mental Health and Addictions Division et al, 2005). P. A. C. E representatives explain that users indicated the drug takes complete control of who you are. This is partially due to the high levels of residential trauma (e.g. : residential schools, abuse, adapting to mainstream society), effects could be compounded due to underlying symptoms. 9 New research on pregnant women out of the University of Toronto suggests that the fetus of meth can affect the fetus. Some babies are being born with a meth addiction a mothers put meth into the babies' food to calm babies down. Meth penetrates the blood brain barrier protection (only certain substances do this) and kick-starts the pleasure

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centre (dopamine) section of the brain in a very extreme way. One neuroscientist indicated it was like putting your foot to the floor of an accelerator in a car for a very long period of time (a cocaine rush would be considered minimal compared to this). user then experiences a devastating crash and the only way to first find the get up again is to take more meth. This is the cycle of addiction. The neurological changes take over an individual's so that the craving for meth dominates the user rather than the other way around (Mental Health and Addictions Division et al, 2005). These and other illusions. Paranoid psychosis can develop in the long-term as dopamine levels become depleted. Bipolar disorders and schizophrenia may also result. Mental Health found that suicide occurs roughly five to six times more often among First Nations youth than non-Aboriginal (Health care addiction workers and others) as they intervene. In fact, they are taught to talk in a low manner will power a The Mind There are most definitely mental health complications that can arise from crystal meth use and addiction. Symptoms include paranoia (resulting in homicidal or suicidal thoughts) depression, fatigue, cravings, dilated pupils, psychotic behaviors and auditory hallucinations (Narcotics Anonymous Southern California, n. d.). Other symptoms include seeing shadows result. Any of these symptoms may be labeled methamphetamine post acute withdrawal syndrome or PAWS. As stated above, crystal meth addiction may increase the possibility of committing suicide to a level described as 'very high risk'. This risk increases when a person is coming down off meth (Saskatchewan Indian Institute of people Technologies, 2007) The majority of First Nations youth have not considered committing suicide (78.9%), but within the communities females were more likely than males to have endorsed thoughts of suicide (First Nations Centre, <https://assignbuster.com/the-emerging-issue-of-crystal-methamphetamine-essay/>

National Aboriginal Health Organization, 2006). Nevertheless, First Nations suicide levels, particularly for youth, are much higher than the Canadian average. In particular, the year 2000 edition of the Health of Canada's Children from the Canadian Institute of Child Health (n. d.).¹¹ This would suggest that for First Nations youth, crystal meth might be a more serious threat than for other groups. Mental instability among users is often evident to authority figures (police officers,¹¹ It is, nonetheless, important to recognize that while overall suicide rates are increasing, there is a wide variation in suicide rates depending on tribal council and language group (Chandler, M & Lalonde, C. (1998) " Cultural Continuity as a Hedge Against Suicide in Canada's First Nations", *Transcultural Psychiatry*, Vol. 35(2) in Health Canada (n. d.). This fact might be an important one to consider with regard to the urgency for crystal meth programming in a particular community. It is also an important piece of public information because it helps combat the kind of collective stereotypical negative imaging that First Nations peoples have been subjected to in the past.¹⁰ calm voice due to distorted perceptions of the user (lights brighter, sounds lower and movements quicker). (Saskatchewan Indian Institute of Technologies, 2004a). They have to do this because a person on meth adopts a ' fight or flight' mentality and one does not want to further alarm the person (Mental Health and Addictions Division et al, d hours without being aware that they are doing it. This is described as one of the ' users separated from his meth supply for too long, he will resort to picking the meth bug scabs and eating them to ingest the last of the chemicals into his body (Meth Bugs, n. d.) crystal meth in a home can severely disturb relationships with one's family and community. In any case where there is addiction, one may often be explosive

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nature of the cooking process makes it dangerous to others in the immediate vicinity (e. g. : next room). (Mental Health and Addictions Division et al, 2005) and extreme irritability. Methamphetamine use during pregnancy may also be linked to congenital deformities. (Narcotics Division et al, 2005). Other mental problems that can arise include "tweaking".

This is when the meth user ends up in a state where they repeat an activity (obsessive compulsive behaviour) for hours and more dangerous phases of meth use (Mental Health and Addictions Division et al, 2005). Severe and chronic levels of crystal meth use may cause the user to perceive 'meth bugs'. This is a clear sign of the deterioration and desperation of someone on meth. Often, users have the sensation of bugs crawling under their skin. To get at that irritation, users will pick at their arms, legs, faces, wherever they feel the "bugs." The result is open sores which take on a grayish leather-like appearance sores which get infected... If the user's relationships, crystal meth usage and the manufacturing of crystal meth in one's home are going to be affected. With meth, however, the added risk of psychotic episodes occurring from chronic use can put added strain on family and friends. Further, a manufacturer of crystal meth may have weaponry in the home which further contributes to a potentially volatile situation for friends and family. Children who are in a home where crystal meth is being manufactured are in danger of being exposed to the toxic chemicals produced from the 'cooking' procedure. (Mental Health and Addictions Division et al, 2005).

Crystal methamphetamine abuse can affect a human life in its earliest stages. Fetal exposure to methamphetamine also is a significant problem in the United States. At present, research indicates that methamphetamine
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abuse during pregnancy may result in prenatal complications, increased rates of premature delivery, and altered neonatal behavioral patterns, such as abnormal reflexes (Anonymous Southern California, n.d.). With regard to relationships to one's community, crime and violence have been attributed to crystal meth manufacturing and abuse. Lloyd Dolha (2004) notes that particularly in Winnipeg, Regina and Edmonton, Aboriginal gangs have been known to traffic in marijuana, crack and crystal meth. In Alberta, according to criminal intelligence Canada, gangs that primarily existed in prison are now recognizing benefits of trafficking hard drugs such as crystal meth on the reserve. In April of 2004, 12 Aboriginal gangs were identified in Alberta, state that has had a severe problem with crystal meth, city sources estimate that of every 100 property crimes are committed by meth addicts. (Byker, n.d.). These are earth-based philosophies. Making 1 kilogram of crystal meth, results in approximately 7 kilograms of toxic waste (Mental Health and Diversion et al, 2005).